



# Special Consideration Application 2011-2012

You have indicated that you and/or your family have experienced a significant change in your financial situation during 2010 or 2011. Review the circumstances listed in this form and identify which apply to your situation.

Complete and forward this document, along with a **typed letter outlining the income change and all applicable documentation**, to the Rhodes State College Office of Financial Aid. Include the **student's name, and student ID number on all documentation**. Failure to document all circumstances and/or losses of income may result in a pending application. A request for additional information will cause a processing delay. **Students who choose to file a Special Consideration Application will be selected for verification. All documentation to support the verification should be turned in with the Special Consideration Appeal (verification worksheet, federal 1040, 1040ez, 1040A tax information, W2, child support, social security, welfare including TANF).**

You will be notified in writing regarding the outcome of your Special Consideration Application. In many instances, an adjustment to the student's record does not always qualify a student for additional financial aid eligibility. If this Special Consideration Application results in a change to the student's financial aid award, the student will receive a new award letter.

**Please note:** *In general, financial aid does not exclude from total income one time capital gains or IRA distributions. Consumer debt, elementary or private high school tuition, parent in college expenses or a reduction in assets will not be considered. A Special Consideration Appeal can only be filed and approved once per aid year. Student's who choose to leave a job to attend school will not be considered for a Special Consideration Appeal.*

## I. Student Information:

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street City State Zip

Student ID: \_\_\_\_\_ Phone: \_\_\_\_\_

## II. Circumstances:

*Check all that apply. Please note that you must provide supporting documentation and a typed explanation of your situation. Datelines of events are essential within this assessment. Details are imperative to accurately capture your financial situation. This form will not be processed until all documentation has been received.*

### Reduction of Income Due to Loss or Change of Job:

**Unemployed:** (must be out of work for at least 6-weeks in 2011 and/or 2012).

1. Provide a statement of benefits from an unemployment agency.
2. A letter from previous employer indicating employment separation and last day worked.
3. Year -to-date earnings for 2011 and/or 2012 (last pay stub).

### **Job Change:**

1. Provide a copy of most recent pay stub(s)
2. Provide final pay stub from your previous employer

### **Disability:**

1. Provide a letter from a physician confirming that disability and prognosis for returning to work.
2. Explain and document monthly income benefits received.

### Loss of Child Support:

1. Provide court or child service agency document stating the date of termination and the amount of monthly benefits received.

       **Medical, Dental, Vision and Prescription Expense:** *(These expenses must not be covered by insurance. Your medical expenses must be PAID. No adjustments will be made for medical expenses incurred without a payment plan. Insurance premiums may also be included.)*

1. Provide a copy of your 2010 federal tax return, copies of checks or other documents showing payment summaries.

### Separation/ Divorce:

1. Provide a copy of the divorce, legal separation papers, or a letter from the participating attorney stating marital status.
2. Documentation confirming separate residences.
3. Describe if spousal or child support will be received.
4. Describe which parent will be supporting any other children.
5. A signed copy of your 2010 federal tax return and all W2 forms to separate out income if needed.

**Death of Parent or Spouse:**

1. Provide a copy of the death certificate and a copy of the parent(s) 2010 federal income tax return and W2 forms to separate out income if needed.

**Other Extenuating Circumstances:**

1. Provide a typed explanation and supporting documentation for consideration

**III. Estimated 2011 Income:**

*Enter the gross expected income for yourself (and your spouse) and/or your parent(s) from January 1, 2011 through December 31, 2011 from the sources indicated below. If an income item does not apply to you, enter "NA" not applicable, in the appropriate space. If an income loss is not documented from what was originally reported on your FAFSA (Free application for federal student aid), it will not be taken into consideration.*

Estimated 2011 Taxable Income		Parent(s)		Student/Spouse	
Gross wages, salaries, severance pay, tips:	Father :	\$ _____	Student:	\$ _____	
	Mother:	\$ _____	Spouse:	\$ _____	
Unemployment benefits:	Total	\$ _____	Total	\$ _____	
Business, farm, rental income:	Total	\$ _____	Total	\$ _____	
Interest/dividend income:	Total	\$ _____	Total	\$ _____	
Other taxable Income Specify Source:	Total	\$ _____	Total	\$ _____	
<b>Total 2011 Taxable Income</b>	Total	\$ _____	Total	\$ _____	
Estimated 2011 Untaxed Income		Parent(s)		Student/Spouse	
Social Security Benefits received by family members	Total	\$ _____	Total	\$ _____	
Child Support Received by all family members	Total	\$ _____	Total	\$ _____	
Public Assistance	Total	\$ _____	Total	\$ _____	
Other Untaxed Income: Specify source:	Total	\$ _____	Total	\$ _____	
<b>Total 2011 Untaxed Income</b>	Total	\$ _____	Total	\$ _____	

## IV. Certification Statement:

I certify that the information on this form is true and complete to the best of my knowledge. I agree to provide the Rhodes State College Financial Aid Office with further proof of the information given on this form. If my financial situation or circumstances change from what I have indicated on this form, I agree to notify the Rhodes State College Financial Aid Office of the change. I also understand that additional financial assistance is NOT guaranteed, but is based upon the availability of funds.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

## Checklist

- I have attached the required 2010 verification documents (federal 1040, W2 statements, child support, social security, welfare including TANF and the 2011-2012 verification worksheet).
- I have checked the appropriate circumstances box (loss of job, loss of child support, medical, separation/divorce, death of parent/spouse, other).
- I have provided a typed letter outlining the changes of my circumstances in detail along with a time line of events.
- I have accurately estimated my income (if necessary) and not left any item blank regarding my income
- The student's ID number is on all documentation.
- I have reviewed this form for accuracy and have attached appropriate documentation.
- I have provided all appropriate signatures.

**RETURN YOUR COMPLETED FORM TO  
THE  
FINANCIAL AID OFFICE AT:**

**Rhodes State College  
4240 Campus Drive  
Lima, Ohio 45804**

**Phone: 419-995-8159  
Fax: 419-995-8112**